TUCSON AREA OFFICE IT TRIBAL SHARES LISTENING SESSION

MARCH 31, 2011

Presentations from Dr. Theresa Cullen (ISAC IT Priorities), Lisa DeCora (IT Tribal Shares listening session process) and Raymond Willie (Tribal Shares)

Listening session included participants from the Tucson Area Office, Pasqua Yaqui Tribe and Tohono O'odham Nation.

Feedback from the participants:

GENERAL COMMENTS ABOUT OIT PRODUCTS/SERVICES

- When entering into a contract or compact, it is important to define what the Tribe is going to do
 and the responsibilities of the IHS. Some PSFAs can be separated but some cannot. Both parties
 need to understand what is severable and what isn't when negotiating a contract/compact. The
 issue should not be about the funding but instead, about the services and the dollars will follow
 that choice.
- OIT activities have changed dramatically since the beginning.
- Are there any specific deliverables and times for tele-health services? The Tribe has attended some training but has not seen any IHS doctors. Would like an update because Tribe believes tele-health/telemedicine will enhance its services.
- Recently, a pharmacy patient needed a test. After the test, patient was told he needed another test and was required to come back for second test. It would be helpful to provide a "pop up" window to alert the pharmacist in order to communicate to the patient and also be more efficient when providing care. There is also a state narcotics database.
- There is concern that pharmacy fraud is occurring and IHS needs to be able to analyze the situation. Currently, the pharmacy package has the ability to run a report.
- What is occurring with data sharing agreements for the EPI centers and BIA data (substance abuse)?
- It appears that IHS monitors itself but an independent source to audit IHS is requested because it comes down to determining money/funding.
- If a Tribe gets its own "off the shelf" electronic health record (EHR), what contract language to use to purchase EHR that will "dump" data into the RPMS?

COMMUNICATION/INFORMATION ON SERVICES/PRICES

• Behavioral health and contract health programs need more funding and support and more funding for upgrades, etc. These programs were contracted before there were computer systems. It would also be helpful to get technical support from the area office. Resources are not available for inputting data into RPMS and would like to know what the plans to get more funding are.

COMMENTS ABOUT TRIBAL CONSULTATION PROCESS

• It would be helpful to receive any presentations in advance of meeting.

- When IHS sends out announcements, agendas and presentations, depending on who they send these to, there is a delay in receiving the information in the health departments. It is important to improve communication with Tribes and respective departments.
- Need more Tribal representation on the Information Systems Advisory Committee (ISAC). ISAC could also improve Tribal communications-communication process should have been in place to begin with. ISAC could provide a document similar to a shareholder report. A Dear Tribal Leader Letter for ISAC and/or OIT could be provided on an annual or regular basis to improve communication to Tribes.